

PROJECT EVALUATION SUMMARY (PES) - PART I

DD-AAF-708
PROJECT TITLE

Training of Paramedical, Auxiliary and Community Personnel (PAC), Asia

2. PROJECT NUMBER

932-0644

3. MISSION/AIC/W OFFICE

ST/POP/TI

4. EVALUATION NUMBER (Enter the number maintained by the reporting unit e.g., Country or AIC/W Administrative Code, Fiscal Year, Serial No. beginning with No. 1 each FY) 82-3
12/15-81

REGULAR EVALUATION SPECIAL EVALUATION

5. KEY PROJECT IMPLEMENTATION DATES

A. First PRO-AG or Equivalent FY 79
B. Final Obligation Expected FY 83
C. Final Input Delivery FY 83

6. ESTIMATED PROJECT FUNDING

A. Total \$ 7,933,701
B. U.S. \$ _____

7. PERIOD COVERED BY EVALUATION

From (month/yr.) 9/79
To (month/yr.) 9/81
Date of Evaluation Review 9/23-24/81

8. ACTION DECISIONS APPROVED BY MISSION OR AID/W OFFICE DIRECTOR

A. List decisions and/or unresolved issues; cite those items needing further study. (NOTE: Mission decisions which anticipate AIC/W or regional office action should specify type of document, e.g., airgram, SPAR, PIC, which will present detailed request.)

B. NAME OF OFFICER RESPONSIBLE FOR ACTION

C. DATE ACTION TO BE COMPLETED

1. Decisions

a. The contractual scope of work will be amended:

(1) To require the training of more nurses, midwives, and auxiliaries, and of fewer community health workers. The total number of workers to be trained will remain the same.

(2) To improve the required needs assessment and program planning documents.

(3) To allow the contractor not to perform activities required in the original contract which the Project Officer now believes would be either counterproductive (i.e., an additional meeting of the Regional Advisory Group) and/or relatively uncost-effective (i.e., training a specified number of people in the United States; establishing a regional office).

P. Williams
CM/COD/PE

Dec. 31, 1981

b. RTSA/A will not proceed towards implementation of any regional (multi-country) courses, seminars, conferences or workshops until there is a clear indication of interest and perceived need for the offering from the Asian USAID missions. The A.I.D. Project Officer will elicit Mission views of proposed regional meetings by cable during the early phases of program planning.

Judith Rooks
ST/POP/TI

n/a

c.-i. = S. Izutsu c,f,i =
on following 10/30/81
pages.

(continued on next page)

9. INVENTORY OF DOCUMENTS TO BE REVISED PER ABOVE DECISIONS

- | | | |
|--|--|--|
| <input type="checkbox"/> Project Paper | <input type="checkbox"/> Implementation Plan e.g., CFI Network | <input type="checkbox"/> Other (Specify) _____ |
| <input type="checkbox"/> Financial Plan | <input checked="" type="checkbox"/> P/O/T | _____ |
| <input type="checkbox"/> Logical Framework | <input type="checkbox"/> P/O/C | <input checked="" type="checkbox"/> Other (Specify) - CONTRACT EXTENSION |
| <input type="checkbox"/> Project Agreement | <input type="checkbox"/> P/O/P | |

10. ALTERNATIVE DECISIONS ON FUTURE OF PROJECT

- A. Continue Project Without Change
B. Change Project Design and/or Change Implementation Plan
C. Discontinue Project

11. PROJECT OFFICER AND HOST COUNTRY OR OTHER RANKING PARTICIPANTS AS APPROPRIATE (Name and Title)

Judith P. Rooks, ST/POP/TI - Project Officer

Judith P. Rooks 12/10/81

12. Mission/AID/W Office Director Approval

Signature *J. Speidel*
Typed Name J. Joseph Speidel ST/POP
Date 12/15/81

c. In order to reduce administrative and logistical errors and improve program planning, the Project Director will delegate more responsibility to the Administrative Assistant and devote more of his own time to planning.

d. In order to make this program more cost-effective the contractor will aggressively try to conserve the money, in part, by (1) spending no more monies for activities involving participation of graduate country nationals; (2) being more selective in decisions to support U.S.-based training, in effect reserving this support only for rare, high priority situations; (3) utilizing the least expensive means of communicating the significant content and outcomes of important training conferences, seminars, workshops, etc. (i.e., not publishing formal "proceedings"); (4) looking for inexpensive places to hold training programs; paying less than the allowable maximum per diem when it is possible to do so while still assuring that the trainees are adequately housed and fed; (5) focusing the program on the basic PAC and management training needs of the A.I.D.-assisted countries, avoiding expenditures for low priority training; and (6) requiring that participating host country organizations and agencies contribute financially and/or in kind to the support of all RTSA/A-assisted training activities, with the nature and extent of their contribution to be specified on each project proposal. Project proposals will also provide an analysis of project costs per trainee and per trainee day of training to enable better comparison of costs when project proposals are being reviewed.

e. Contractor will spend no further energy towards working with the Asian "graduate" countries (i.e., Hong Kong, Korea, Malaysia, Singapore and Taiwan). The only exception to this may be activities directed towards utilization of already developed and available training resources in those countries for third-country training of persons from A.I.D.-assisted Asian countries. If RTSA/A identifies training resources in "graduate" countries which are valuable and unique (i.e., not similar to training opportunities available in an A.I.D.-assisted country), they will write a brief paper describing the program for A.I.D. review and approval before taking any steps to develop collaboration with the graduate country training organization.

f. RTSA/A will investigate an inexpensive way to utilize a computer to store, tabulate and summarize data to make it possible for them to quickly and easily determine the numbers of people trained and the expenditure of funds by country, worker category, type of training, rural/urban place of work, employment in government or NGO, sex, site of training (U.S., regional or in-country), and length of training. The A.I.D. Project Officer has sent RTSA/A a copy of the basic data collection form used by Development Associates to organize data from a similar ST/POP/TI-supported contract for PAC training in LAC.

g. All future RTSA/A semiannual reports will include the following:

(1) The numbers of trainers, educators or instructors who have been trained through RTSA/A-supported activities;

(2) The numbers of managers and/or supervisors who have been trained through RTSA/A-supported activities;

(3) The proportion of total subcontract and participant costs which have gone to support training related to:

- technical skills,
- pre-service; curriculum development; materials preparation,
- management/supervision,
- and training of trainers.

h. Whenever possible RTSA/A will negotiate subcontracts with LDC training institutions and other LDC agencies and organizations in order to maximize their participation in and responsibility for RTSA/A-assisted training programs.

i. In order to address the need for development, sharing and distribution of training materials, curriculum plans, et cetera, RTSA/A will employ a materials development specialist on a part time or temporary basis.

2. Unresolved Issues/Problems

Although the contract requires country-specific training needs assessments, RTSA/A was directed by AID/W early in the contract term that conducting needs assessments would not be necessary as the information was already available. As a result, RTSA/A has never adequately assessed the training status and needs of the PAC and management/supervisory personnel who provide family planning services in the A.I.D.-assisted Asian countries. The lack of adequate needs assessments has substantially undermined their ability to identify priority needs and plan programs to address them.

RTSA/A has assembled some of the information which is necessary to assess the PAC training needs in specific countries by arranging for representatives of each country to prepare and present "country reports" including this information at several regional meetings. In addition, they have asked the Population staff of each of the USAID missions to tell RTSA/A what the Mission and the country "needs" in the way of training to improve the performance of family planning PAC and supervisory/management personnel. RTSA/A has assumed that these actions constitute an adequate needs assessment and still has not really assessed the adequacy of the pre-service, in-service and refresher training provided to the more important categories of PAC workers in each country in order to identify significant problems and needs. Although this point in time (the beginning of the last year of their contract) is late to correct this problem, it will be corrected early in any new contract or contract extension.

13. Summary

This program has had a slow and difficult start up due to the internal and external problems which are described in this PES. It should be noted that, in addition to certain important internal administrative weaknesses, several of RTSA/A's more significant problems have been caused by inappropriate requirements contained within their contract, poor advice they received from AID/Washington early in the contract, and insufficient AID/W monitoring of the contract during its start-up phase. These problems either have been or are being resolved. Currently RTSA/A is making valuable and increasingly significant contributions in several countries, especially India, Nepal and the Philippines. Their staff includes persons with significant technical expertise, especially since the addition less than a year ago of an extremely competent nurse-midwife/educator. A recent AID/W query to the field regarding tentatively planned RTSA/A activities for next year showed very high USAID mission interest in activities to increase and improve family planning training in professional and auxiliary-level nursing/midwifery schools.

An external evaluation planned for 1982 should include an assessment of their internal administration and the development of options for altering this or a new training contract to better fit the needs of Asia.

14. Evaluation Methodology

The A.I.D.-University of Hawaii contract for this program calls for an in-house A.I.D. evaluation by the end of the 24th project month (October 1981). This evaluation conforms to that time frame. The purposes were to identify progress against the contract's clear, quantitative goals; to identify problems, strengths and weaknesses as a basis for program improvement; and to clarify issues which need to be examined in more depth during an external evaluation which will be conducted before the contract termination date (9/29/82).

This evaluation was conducted by Judith Rooks, the Project Officer. She reviewed the entire project files and history, especially the proceedings of the May 1981 meeting of RTSA/A's Regional Advisory Group, the original draft of their six-month report for January-June 1981; meetings held at A.I.D. in August 1981 to discuss training strategies and evaluation issues regarding the RTSA/A contract and two similar contracts being implemented in Africa and LAC, and the progress and process of RTSA/A activities during May to August 1981, and described her assessment of the program's strengths, weaknesses, problems and potentials in a letter to Dr. Satoru Izutsu, the Project Director. On September 23 and 24, 1981, Ms. Rooks and Dr. Izutsu met at A.I.D. to discuss the contents of that letter, agree upon desirable changes to be made in the contractual scope of work, come to some agreement on the nature of problems affecting this project, and plan actions to reduce those problems.

15. External Factor

a. The design of this contract was based upon A.I.D.'s experience with a similar contract in the Latin American/Caribbean region. Because of the large bilateral A.I.D. budgets and staffs in most Asian A.I.D.-assisted countries, there is less need for this kind of centrally funded training program in Asia than in LAC.

b. In addition to this general consideration, a variety of conditions have made it difficult for RTSA/A to function in several Asian countries which by most criteria would appear to be in highest priority need of assistance, i.e.,

- Political instability has made it very difficult to obtain the necessary governmental approvals to start new projects in Bangladesh.

- The USAID Mission in Sri Lanka has placed a hold on centrally funded population activities there.

- The Government of India in general does not wish technical assistance from A.I.D.-supported programs outside of their bilateral agreement with USAID. Although RTSA/A now appears to be excepted from this proscription, it took them a long time to establish the necessary working relationship in India.

c. Early in the term of this contract, AID/Washington verbally directed and advised the contractor to disregard certain aspects of their contractual scope of work, i.e., conducting country-specific assessment of training needs, to utilize the training expertise available in graduate countries, and to focus on testing new and innovative approaches to training. Although given strongly, this advice was not written down. As it directly contradicted the requirements of the contract as well as certain A.I.D. policies, it caused considerable confusion. Problems resulting from this advice were not clearly recognized and addressed and the advice rescinded until the term of the contract was more than half way over due to insufficient AID/W project monitoring (due to a severe personnel shortage in the Training Division).

16. Problems with Inputs

a. Although their contract specifies that at least 60% of their training assistance should involve subcontracting arrangements with LDC training institutions and other organizations, RTSA/A has negotiated relatively few subcontracts during its first two years.

b. The contract-mandated annual Regional Advisory Group meetings have consumed a great deal of staff time, as well as money, and have not been very productive.

c. RTSA/A still has not conducted adequate country-specific training needs assessments - i.e., they have not obtained and summarized information to describe the key categories of PAC workers and family planning program supervisors/administrators in each country and the adequacy of their role performance as related to training.

- d. They have not planned their program realistically.
- e. They have had difficulty establishing effective working relationships with the Population staffs of some missions.
- f. They have not adequately addressed the need for development, sharing and distribution of training materials - e.g., curriculum plans, teaching-learning modules, manuals, books, film slide sets, movies, etc.
- g. They have invested too much staff time and money in graduate countries.
- h. There have been too many administrative errors. I believe that these are the result of inadequate administrative procedures, inadequate supervision of staff, and lack of a spirit of teamwork.

17. Outputs

Within the first two years of this three-year contract, RTSA/A has trained only 25% of the total number of participants required by the contract. The category in which they have come closest to meeting their contractual obligation is U.S.-based training, which is the lowest priority category.

a. Site and Type of Training: Activities as of September 1981, compared to contractual obligations:

Category of Activity	Contractual		Implemented as of September 1981		
	#	%	#	%	% of No. in Contract
<u>Training</u>					
In-Country	(2,794)	(65.8)	(739)	(69.2)	26%
Regional	(290)	(6.8)	(69)	(6.5)	24%
U.S.	(91)	(2.1)	(41)	(3.8)	45%
Subtotal	3,175	74.8	849	79.5	27%
<u>Conferences, Seminars and Workshops</u>	790	18.6	169	15.8	21%
<u>Study & Observation</u>					
Trips	280	6.6	50	4.7	18%
TOTAL	4,245	100.0	1,068	100.00	25%

They seem to have no difficulty meeting and exceeding their contractual obligations for training nurses/midwives and auxiliary workers, but will probably be unable to meet their original obligation in regard to community level workers. I believe this is because they have the clinical expertise needed for organizing programs for nurses and midwives, and because in many

Asian countries the major categories of community or village-level workers are trained within large national programs which are already supported by other donors.

b. Categories of People Trained: Activities as of September 1981, compared to contractual obligations:

<u>Category of Trainers</u>	<u>Numbers</u>		<u>No. Trained as of 9/81 as % of total required</u>
	<u>Required by Contract</u>	<u>Trained as of September 1981</u>	
Nurses/Midwives	162	115	71%
Auxiliaries	154	135	88%
Community Workers	2,352	361	15%
Trainers	189	84	44%
Managers, Supervisors, etc.	318	152	48%

18. Purpose

The purpose of this program is to make it possible for LDC family planning delivery systems to be staffed with paramedicals, auxiliaries and community workers (PACs) who are adequately trained and motivated in POP/FP knowledge and skills and who, therefore, will be capable of providing the means for family planning. The general objectives are:

a. To strengthen and expand LDC action agencies that provide or assist in making FP services available, with emphasis on the rural and urban poor; by extending and enhancing the effectiveness of in-service training for PAC personnel; by improving the capacity of relevant pre-service PAC training systems; and by working to change conditions that inhibit the ability or willingness of service systems to make maximum use of PAC personnel.

b. To develop and upgrade LDC PAC training systems with the end result being that developing countries will have sufficient capability to plan for and implement their own PAC training programs.

c. To integrate FP training and content with other closely related areas such as maternal and child health when necessary.

RTSA/A's progress to date can be summarized as follows: In India they have begun the first phases of a planned multiphased training program which, if successful, has the potential to significantly improve the family planning communications training for the major categories of workers in India's primary health care system. In Indonesia they have provided high level training, mainly in design and management of community-based family planning and primary health care programs, for 19 highly placed officials. In Nepal they are making a significant contribution to training the financial, logistics and key middle-level administrators of the government's FP/MCH program; to developing an in-country capability to train professional nurses to provide clinical

contraception, including insertion of IUDs; and to upgrading the teaching and curriculum development skills of the FP/MCH program training team. In the Philippines they have assisted with a series of training activities directed towards developing a community-based family planning service program and training midwives in family planning. In Sri Lanka they are providing family planning clinical skills training, including IUD insertion, to Assistant Medical Practitioners (AMPs), who provide basic medical care in the country's small rural health posts. In Thailand they are assisting in a careful evaluation of family planning refresher training for auxiliary midwives and in the development of several new approaches for developing family planning counseling skills in community personnel. RTSA/A staff have also provided substantial technical assistance to the USAID missions in India and Thailand.

19 - 21. n/a

22. Lessons Learned

There is a need in Asia for assistance which combines professional expertise in PAC training with managerial responsiveness and flexible financial resources. However, a contract which specifies the number and categories of people to be trained is too inflexible for effective implementation in Asia, where it is necessary to coordinate with many other donors. Future contracts for family planning personnel training assistance in Asia should be extremely flexible and able to facilitate the provision of technical and other assistance where needed, without reference to preconceived quantitative outputs.

The external evaluation planned for 1982 should include a management evaluation of RTSA/A's internal organizational structure, working relationships, personnel, and administrative procedures. The field evaluation should include assessment of the value of RTSA/A's Regional Advisory Group to date and recommendations regarding its appropriate role if this contract were to be extended, and development of options for altering this contract or designing a new contract to provide needed technical and other assistance for upgrading the training of personnel to provide family planning services in Asia.